

By Asst. Dir.

H. B. No. 1615

A BILL TO BE ENTITLED

AN ACT

relating to insurance coverage for the services of certain audiologists, speech pathologists, and language pathologists.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Subsection (E), Section 1, Chapter 397, Acts of the 54th Legislature, Regular Session, 1955 (Article 3.70-1, Vernon's Texas Insurance Code), is amended to read as follows:

(E) Standards for Policy Provisions. (1) The Board shall issue reasonable rules and regulations to establish specific standards including standards for readability of policies and for full and fair disclosure, that set forth the manner, content, and required disclosure for the sale of individual policies of accident and sickness insurance which shall be in addition to and in accordance with applicable laws of this state which may cover but shall not be limited to:

(a) terms of renewability;

(b) initial and subsequent conditions of eligibility;

(c) nonduplication of coverage provisions;

(d) coverage of dependents;

(e) pre-existing conditions;

(f) termination of insurance;

(g) probationary periods;

(h) limitations;

(i) exceptions;

1 (j) reductions;

2 (k) elimination periods;

3 (l) requirements for replacement;

4 (m) recurrent conditions; and

5 (n) the definition of terms including but not limited to the
6 following: hospital, accident, sickness, injury, physician,
7 accidental means, total disability, partial disability, nervous
8 disorder, guaranteed renewable and noncancellable; provided that
9 any definition of hospital so developed shall not be applicable to
10 companies organized under Chapter 20 of this code, as amended. The
11 terms "sickness" and "injury" include a loss or impairment of
12 speech, spoken language skills, language comprehension, or hearing.

13 SECTION 2. Section 2, Chapter 397, Acts of the 54th
14 Legislature, Regular Session, 1955 (Article 3.70-2, Vernon's Texas
15 Insurance Code), is amended by amending Subsection (B) and by
16 adding Subsection (F) to read as follows:

17 (B) No policy of accident and sickness insurance shall make
18 benefits contingent upon treatment or examination by a particular
19 practitioner or by particular practitioners of the healing arts
20 hereinafter designated unless such policy contains a provision
21 designating the practitioner or practitioners who will be
22 recognized by the insurer and those who will not be recognized by
23 the insurer. Such provision may be located in the "Exceptions" or
24 "Exceptions and Reductions" provisions or elsewhere in the policy,
25 or by endorsement attached to the policy, at the insurer's option.
26 In designating the practitioners who will and will not be
27 recognized, such provision shall use the following terms: Doctor

1 of Medicine, Doctor of Osteopathy, Doctor of Dentistry, Doctor
2 Chiropractic, Doctor of Optometry, Doctor of Podiatry, Audiologist,
3 and Speech-language Pathologist. For purposes of this Act, such
4 designations shall have the following meanings:

5 Doctor of Medicine: One licensed by the Texas State Board of
6 Medical Examiners on the basis of the degree "Doctor of Medicine";

7 Doctor of Osteopathy: One licensed by the Texas State Board
8 of Medical Examiners on the basis of the degree of "Doctor of
9 Osteopathy";

10 Doctor of Dentistry: One licensed by the State Board of
11 Dental Examiners;

12 Doctor of Chiropractic: One licensed by the Texas Board of
13 Chiropractic Examiners;

14 Doctor of Optometry: One licensed by the Texas State Board
15 of Examiners in Optometry; [and]

16 Doctor of Podiatry: One licensed by the State Board of
17 Chiropody Examiners;

18 Audiologist: One with a master's or doctorate degree in
19 audiology from an accredited college or university and who is
20 certified by the American Speech and Hearing Association; and

21 Speech-language Pathologist: One with a master's or
22 doctorate degree in speech pathology or speech-language pathology
23 from an accredited college or university and who is certified by
24 the American Speech and Hearing Association.

25 (F) An individual policy or group policy of accident and
26 sickness insurance, including a policy issued by a corporation
27 subject to Chapter 20, Insurance Code, that is delivered or issued

1 for delivery to any person in this state, may not exclude coverage
2 for loss or impairment of speech, language, or hearing.

3 SECTION 3. Article 21.52, Insurance Code, is amended to read
4 as follows:

5 Art. 21.52. RIGHT TO SELECT PRACTITIONER UNDER HEALTH AND
6 ACCIDENT POLICIES

7 Sec. 1. DEFINITIONS. As used in this article:

8 (a) "health insurance policy" means any individual, group,
9 blanket, or franchise insurance policy, insurance agreement, or
10 group hospital service contract, providing benefits for medical or
11 surgical expenses incurred as a result of an accident or sickness;

12 (b) "doctor of podiatric medicine" includes D.P.M.,
13 podiatrist, doctor of surgical chiropody, D.S.C., and chiropodist;

14 (c) "doctor of optometry" includes optometrist, doctor of
15 optometry, and O.D.; [and]

16 (d) "doctor of chiropractic" means a person who is licensed
17 by the Texas Board of Chiropractic Examiners to practice
18 chiropractic; [-]

19 (e) [~~d~~] "licensed dentist" means a person who is licensed
20 to practice dentistry by the State Board of Dental Examiners;

21 (f) "audiologist" means a person who has received a master's
22 or doctorate degree in audiology from an accredited college or
23 university and is certified by the American Speech and Hearing
24 Association; and

25 (g) "speech-language pathologist" means a person who is
26 certified by the American Speech and Hearing Association to restore
27 speech loss or correct a speech impairment.

1 Sec. 2. APPLICATION OF THIS ARTICLE. This article applies
2 to and embraces all insurance companies, associations, and
3 organizations, whether incorporated or not, which provide health
4 benefits, accident benefits, or health and accident benefits for
5 medical or surgical expenses incurred as a result of an accident or
6 sickness. Without limiting the foregoing, this article
7 specifically applies to the insurance companies, associations, and
8 organizations which come within the purview of the following
9 designated chapters of the Insurance Code: Chapter 3, pertaining
10 to life, health and accident insurance companies; Chapter 8,
11 pertaining to general casualty companies; Chapter 10, pertaining to
12 fraternal benefit societies; Chapter 11, pertaining to mutual life
13 insurance companies; Chapter 12, pertaining to local mutual aid
14 associations; Chapters 13 and 14, pertaining to statewide mutual
15 assessment companies, mutual assessment companies, and mutual
16 assessment life, health and accident associations; Chapter 15,
17 pertaining to mutual insurance companies writing other than life
18 insurance; Chapter 18, pertaining to underwriters making insurance
19 on the Lloyd's Plan; Chapter 19, pertaining to reciprocal
20 exchanges; and Chapter 22, pertaining to stipulated premium
21 insurance companies. This article also applies to health
22 maintenance organizations established pursuant to Chapter 214, Acts
23 of the 64th Legislature, Regular Session, 1975 (Articles
24 20A.01-20A.33., Insurance Code), as now or hereafter amended.

25 Sec. 3. SELECTION OF PRACTITIONERS. Any person who is
26 issued, who is a party to, or who is a beneficiary under any health
27 insurance policy delivered, renewed, or issued for delivery in this

1 state by any insurance company, association, or organization to
2 which this article applies may select a licensed doctor of
3 podiatric medicine, a licensed dentist, or a doctor of chiropractic
4 to perform the medical or surgical services or procedures scheduled
5 in the policy which fall within the scope of the license of that
6 practitioner, [~~deeter-er~~] a licensed doctor of optometry to perform
7 the services or procedures scheduled in the policy which fall
8 within the scope of the license of that doctor of optometry, an
9 audiologist to measure hearing for the purpose of determining the
10 presence or extent of a hearing loss and to provide aural
11 rehabilitation services to a person with a hearing loss if those
12 services or procedures are scheduled in the policy, or a
13 speech-language pathologist to evaluate speech and language and to
14 provide habilitative and rehabilitative services to restore speech
15 or language loss or to correct a speech or language impairment if
16 those services or procedures are scheduled in the policy. The
17 [~~and~~] payment or reimbursement by the insurance company,
18 association, or organization for those services or procedures in
19 accordance with the payment schedule or the payment provisions in
20 the policy shall not be denied because the same were performed by a
21 licensed doctor of podiatric medicine, a licensed doctor of
22 optometry, [~~er~~] a licensed doctor of chiropractic, a licensed
23 dentist, an audiologist, or a speech-language pathologist. There
24 shall not be any classification, differentiation, or other
25 discrimination in the payment schedule or the payment provisions in
26 a health insurance policy, nor in the amount or manner of payment
27 or reimbursement thereunder, between scheduled services or

1 procedures when performed by a doctor of podiatric medicine, a
2 doctor of optometry, [er] a doctor of chiropractic, a licensed
3 dentist, an audiologist, or a speech-language pathologist which
4 fall within the scope of his license or certification and the same
5 services or procedures when performed by any other practitioner of
6 the healing arts whose services or procedures are covered by the
7 policy. Any provision in a health insurance policy contrary to or
8 in conflict with the provisions of this article shall, to the
9 extent of the conflict, be void, but such invalidity shall not
10 affect the validity of the other provisions of this policy. Any
11 presently approved policy form containing any provision in conflict
12 with the requirements of this Act shall be brought into compliance
13 with this Act by the use of riders and endorsements which have been
14 approved by the State Board of Insurance or by the filing of new or
15 revised policy forms for approval by the State Board of Insurance.

16 [See: -3- --SELECTION--OF--PRACTITIONERS: ---Any--person--who-is
17 issued,-who-is-a-party-to,-or-who-is-a-beneficiary-under-any-health
18 insurance-policy-delivered,-renewed,-or-issued-for-delivery-in-this
19 state-by-any-insurance-company,--association,-or--organization--to
20 which--this--article--applies--may--select--a--licensed--doctor--of
21 pediatric-medicine-or-a-licensed-dentist-to-perform-the-medical--or
22 surgical--services-or-procedures-scheduled-in-the-policy-which-fall
23 within-the-scope-of-the-license-of-that-doctor-or-a-licensed-doctor
24 of-optometry--or--licensed--dentist--to--perform--the--services--or
25 procedures--scheduled--in-the-policy-which-fall-within-the-scope-of
26 the-license-of-that-doctor-of-optometry-or--licensed--dentist,--and
27 payment--or-reimbursement-by-the-insurance-company,-association,-or

1 organization-for-those-services-or-procedures--in--accordance--with
2 the--payment-schedule-or-the-payment-provisions-in-the-policy-shall
3 not-be-denied-because-the-same-were-performed-by-a-licensed--doctor
4 of--pediatric--medicine,--a--licensed--doctor--of--optometry,--or-a
5 licensed--dentist. ---There--shall--not---be---any---classification,
6 differentiation,--or-other-discrimination-in-the-payment-schedule-or
7 the--payment--provisions--in--a-health-insurance-policy,--nor-in-the
8 amount-or-manner-of-payment-or--reimbursement--thereunder,--between
9 scheduled--services--or--procedures--when--performed-by-a-doctor-of
10 pediatric-medicine,--a-doctor-of-optometry,--or--a--licensed--dentist
11 which-fall-within-the-scope-of-his-license-and-the-same-services-or
12 procedures--when-performed-by-any-other-practitioner-of-the-healing
13 arts-whose-services-or-procedures-are-covered-by-the--policy. ---Any
14 provision--in--a-health-insurance-policy-contrary-to-or-in-conflict
15 with-the-provisions-of-this-article-shall,--to--the--extent--of--the
16 conflict,--be--void,--but--such--invalidity--shall--not--affect-the
17 validity-of-the-other-provisions-of--this--policy. ---Any--presently
18 approved--policy-form-containing-any-provision-in-conflict-with-the
19 requirements-of-this-Act-may-be-brought-into-compliance--with--this
20 Act--by-the-use-of-riders-and-endorsements-which-have-been-approved
21 by-the-State-Board-of-Insurance-or-by-the-filing-of-new-or--revised
22 policy-forms-for-approval-by-the-State-Board-of-Insurance.]

23 Sec. 4. CERTAIN EXEMPTIONS NOT APPLICABLE. The exemptions
24 and exceptions in Articles 13.09 and 21.41 of the Insurance Code do
25 not apply to this article.

26 SECTION 4. This Act takes effect September 1, 1983.

27 SECTION 5. The importance of this legislation and the

1 crowded condition of the calendars in both houses create an
2 emergency and an imperative public necessity that the
3 constitutional rule requiring bills to be read on three several
4 days in each house be suspended, and this rule is hereby suspended.

H. B. No. 1615

By Aditya Sin

AN ACT

relating to insurance coverage for the services of certain audiologists, speech pathologists, and language pathologists.

MAR 9 1983

1. Filed with the Chief Clerk.

MAR 23 1983

2. Read first time and Referred to Committee on

Insurance

3. Reported _____ favorably (as amended) and sent to Printer at _____
(as substituted)

4. Printed and distributed at _____

5. Sent to Committee on Calendars at _____

6. Read second time (amended); passed to third reading (failed) by (Non-Record Vote) (Record Vote of _____ yeas, _____ nays, _____ present, not voting).

7. Motion to reconsider and table the vote by which H.B. _____ was ordered engrossed prevailed (failed) by a (Non-Record Vote) (Record Vote of _____ yeas, _____ nays, and _____ present, not voting).

8. Constitutional Rule requiring bills to be read on three several days suspended (failed to suspend) by a four-fifths vote of _____ yeas, _____ nays, and _____ present, not voting.

9. Read third time (amended); finally passed (failed) by (Non-Record Vote) (Record Vote of _____ yeas, _____ nays, _____ present, not voting).

10. Caption ordered amended to conform to body of bill.

11. Motion to reconsider and table the vote by which H. B. _____ was finally passed prevailed (failed) by a (Non-Record Vote) (Record Vote of _____ yeas, _____ nays, and _____ present, not voting).

12. Ordered Engrossed at _____

13. Engrossed.

14. Returned to Chief Clerk at _____

15. Sent to Senate.

Chief Clerk of the House

16. Received from the House

17. Read, referred to Committee on _____

18. Reported favorably

19. Reported adversely, with favorable Committee Substitute; Committee Substitute read first time.

20. Ordered not printed.

21. Regular order of business suspended by

(a viva voce vote.)

(_____ years, _____ days.)

_____ 22. To permit consideration, reading and passage, Senate and Constitutional Rules
suspended by vote of _____ yeas, _____ nays.

_____ 23. Read second time _____ passed to third reading by:
(a viva voce vote.)
(_____ yeas, _____ nays.)

_____ 24. Caption ordered amended to conform to body of bill.

_____ 25. Senate and Constitutional 3-Day Rules suspended by vote of _____ yeas,
_____ nays to place bill on third reading and final passage.

_____ 26. Read third time and passed by
(a viva voce vote.)
(_____ yeas, _____ nays.)

OTHER ACTION:

OTHER ACTION:

Secretary of the Senate

_____ 27. Returned to the House.

_____ 28. Received from the Senate (with amendments,
(as substituted.)

_____ 29. House (Concurred) (Refused to Concur) in Senate (Amendments) by a (Non-Record
(Substitute) Vote) (Record Vote of _____ yeas, _____ nays, _____ present,
not voting).

_____ 30. Conference Committee Ordered.

_____ 31. Conference Committee Report Adopted (Rejected) by a (Non-Record Vote) (Record
Vote of _____ yeas, _____ nays, and _____ present, not voting).

_____ 32. Ordered Enrolled at _____